PTO/SB/06 (08-03)

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CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY	OR		R THAN ENTITY
FOR NUMBER FILED NUMBER EXTRA				MEER EXTRA		RATE	FEE		RATE	FEE	
ë	CFR 1.16(a))							3	OR		
	TAL CLAIMS CFR 1.16(c))		minus 20 =		•		XS =		1		
DXI CX	DEPENDENT CLA CFR 1.18(b))	IMS	mhus 3 -						OR	× \$=	_
					-	X \$=		OR	X \$=		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$ u		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) (Column 3)											
10	115/14	(Column 1)		(Column 2	(Column 3)	•	SMALL E	NTITY	OR .		ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total (37 CFR 1.18(c))	27	Minus	27	*		x s =		OR	X\$ =	FEE
	independent pr CFR 1.16(b))	2	Minus	3.	=		x \$ =		OR		
	FIRST, PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									X \$=	
						i i	TOTAL		OR	+ s =	
1	21513						ADD'L FEE		QR	ADD'L FEE	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								, ,		
DMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA	/	RATE	ADDI- TIONAL FEE	/	RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.18(e))	21	Minus	21	= /		x \$ -	/	OR	X \$ =	/==
MEN	Independent (37 CFR 1.18(b))	3	Minus	2	- /	Ī	x \$_ =		OR	X \$ =	/
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(6))						+1 =	-/-	OR	+3 =	/
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					Γ	
DMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
	Total . pr cfR i.is(e))	•	Minus	**	=		x s =		~ T	Y	, ee
AMENI	Independent (37 C≠R 1.16(b))	•	Minus	***			x s =		OR OR	x s =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ 5		OR		
T									- fin	TOTAL	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											
	in nia uffitezi M	umber Previously P mber Previously P	Paid For	IN THIS SPACE	is less than 3 and	tor "	2 **	e ecomoriate	hay la sali	uma 4	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.